

## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

02/07/2011

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:

NJR000076810

INSTALLATION NAME:

AKZO NOBEL SURFACE CHEMISTRY LLC

INSTALLATION ADDRESS:

10 FINDERNE AVE BLDG 8 **BRIDGEWATER, NJ 08807** 

MAILING ADDRESS:

10 FINDERNE AVE SUITE A BRIDGEWATER, NJ 08807

EPA Form 8700-12AB (4-80)

**USEPA - REGION 2 RCRA Programs Branch** 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-4437

TO: AKZO NOBEL SURFACE CHEMISTRY LLC

or Current Occupant

ATTN: JENNIFER HERGERT

10 FINDERNE AVE SUITE A BRIDGEWATER, NJ, 08807



OMB# 2050-0024; Expires 11/30/2011



<u>SEND</u> COMPLETED United States Environmental Protection Agency 11 JAN 2 FORM TO: The Appropriate RCRA SUBTITLE C SITE IDENTIFICATION FORM State or Regional Office. Reason for Reason for Submittal: Submittal III To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location) To provide a Subsequent Notification (to update site identification information for this location) MARK ALL BOX(ES) THAT As a component of a First RCRA Hazardous Waste Part A Permit Application **APPLY** As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #\_ As a component of the Hazardous Waste Report (If marked, see sub-bullet below) Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations) NJR10000101076181101 2. Site EPA ID **EPA ID Number** Number Site Name Akzo Nobel Surface Chemistry, LLC 3. A.M. 10 Finderne Avenue, Building 8 4. **Site Location** Street Address: Information County: Somerset City, Town, or Village: Bridgewater Country: USA 08807 State: NJ Zip Code: 8 State Other Tribal ▼ Private County ☐ District ☐ Federal Municipal Site Land Type Di() 5 | 4 | 1 | 7 | 1 | 2 | 6. NAICS Code(s) for the Site (at least 5-digit D. B. codes) Jezz. 15 Street or P.O. Box: 10 Finderne Avenue, Suite A Site Mailing Address City, Town, or Village: Bridgewater Zip Code: 08807 Country: USA State: NJ **Site Contact** First Name: Jennifer MI: Last: Hergert Person Title: HR/HSE Manager 在らいるかな Street or P.O. Box: 10 Finderne Avenue, Suite A City, Town or Village: Bridgewater Zip Code: 08807 State: NJ Country: USA Email: jennifer.hergert@akzonobel.com Phone: 908-203-2923 Fax: 908-685-7079 Ext.: Date Became 07/06/2010 **Legal Owner** A. Name of Site's Legal Owner: Denver Road, LLC Owner: and Operator Owner Type: Private County District Federal ☐ Tribal ☐ Municipal ☐ State Other of the Site 8/201 Street or P.O. Box: 40 Airport Road Phone: 732-364-9704 City, Town, or Village: Lakewood Zip Code: 08701 Country: USA State: NJ Date Became 01/01/2009 CP B. Name of Site's Operator: Akzo Nobel Surface Chemistry, LLC Operator:

EPA Form 8700-12, 8700-13 A/B, 8700-23 (Revised 11/2009)

 ➤ Private

Operator

Type:

Municipal

State

Page 1 of \_1

☐ Tribal

☐ Federal

Speke to Builde #8. The sets in the database

County District

A. Hazardous Waste Activities; Complete all parts 1-7.  Y \( \) \(	EF	טו אי	Num	ıber				_				OMB#: 2050-0024; Expires 11/30/2011		
Y N     1. Generator of Hazardous Waste   fr "Yes", mark only one of the following – a, b, or c.	10.	10. Type of Regulated Waste Activity (at your site)  Mark "Yes" or "No" for all <u>current</u> activities (as of the date submitting the form); complete any additional boxes as instructed.												
If "Yes", mark only one of the following - a, b, or c.	A.	Haz	Hazardous Waste Activities; Complete all parts 1-7.											
(2,200 lbs,/mo.) or more of hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 1 kg/mo (2.2 lbs,/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 10 kg/mo (220 lbs,/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 10 kg/mo (220 lbs,/mo) of acute hazardous waste; or Generates, in any calendar month, or accumulates at any time, more than 10 kg/mo (220 lbs,/mo) of non-acute hazardous waste.    C CESQG: Less than 100 kg/mo (220 – 2,200 lbs,/mo) of non-acute hazardous waste.    G CESQG: Less than 100 kg/mo (220 lbs,/mo) of non-acute hazardous waste.    If "Yes" above, indicate other generator activities.   Y							ng –	a, b, or c.	Y 🗖	N 🗵	_If "Yes", mark all that apply.			
acute hazardous waste.    c. CESQG: Less than 100 kg/mo (220 lbs /mo) of non-acute hazardous waste.   c. CESQG: Less than 100 kg/mo (220 lbs /mo) of non-acute hazardous waste.   f "Yes" above, indicate other generator activities.   f "Yes" above, indicate other generator activities.   d. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes", provide an explanation in the Comments section.   v					a.	LQG:	(2,200 lbs./mo.) or more of Generates, in any calenda accumulates at any time, lbs./mo) of acute hazardo Generates, in any calenda accumulates at any time, (220 lbs./mo) of acute haz	, in any calendar month, 1,000 kg/mo /mo.) or more of hazardous waste; or , in any calendar month, or es at any time, more than 1 kg/mo (2. acute hazardous waste; or , in any calendar month, or es at any time, more than 100 kg/mo				<ul> <li>b. Transfer Facility (at your site)</li> <li>3. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities.</li> </ul>		
C. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.    G. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.    If "Yes" above, indicate other generator activities.   Y				×	b.	SQG:	100 to 1,000 kg/mo (220 - acute hazardous waste.	1,000 kg/mo (220 – 2,200 lbs./mo) of non-						
Y			c. CESQG: Less than 100 kg/mo (220 lbs./mo) of non-a hazardous waste.			,	Υ□	N⊠	If "Yes", mark all that apply.  a. Small Quantity On-site Burner					
y □ N ☒ e. United States Importer of Hazardous Waste y □ N ☒ f. Mixed Waste (hazardous and radioactive) Generator  B. Universal Waste Activities; Complete all parts 1-2. y □ N ☒ 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.  a. Batteries b. Pesticides c. Mercury containing equipment d. Lamps e. Other (specify) f. Other (specify) f. Other (specify)  f. Other (specify)  f. Mixed Waste (hazardous Waste y □ N ☒ 6. Underground Injection Control y □ N ☒ 7. Receives Hazardous Waste from Off  C. Used Oil Activities; Complete all parts 1-4. Y □ N ☒ 1. Used Oil Transporter If "Yes", mark all that apply. □ a. Transporter □ b. Transfer Facility (at your site)  Y □ N ☒ 2. Used Oil Processor and/or Re-refine If "Yes", mark all that apply. □ a. Processor □ b. Re-refiner  Y □ N ☒ 3. Off-Specification Used Oil Burner	Y	□ N	×	d. Short-Term Generator (generate from a short-term or one-time event and not from on-going processes). If "Yes",						□ b. Smelting, Melting, and Refining				
Y □ N ☒       f. Mixed Waste (hazardous and radioactive) Generator       Y □ N ☒       7. Receives Hazardous Waste from Off         B. Universal Waste Activities; Complete all parts 1-2.       C. Used Oil Activities; Complete all parts 1-4.         Y □ N ☒       1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.         a. Batteries       □         b. Pesticides       □         c. Mercury containing equipment       □         d. Lamps       □         e. Other (specify)       □         f. Other (specify)       □         y □ N ☒       7. Receives Hazardous Waste from Off         C. Used Oil Activities; Complete all parts 1-4.         Y □ N ☒       1. Used Oil Transporter         If "Yes", mark all that apply.         □ a. Transporter         If "Yes", mark all that apply.         □ a. Processor         □ b. Re-refiner         Y □ N ☒       3. Off-Specification Used Oil Burner	Y	ПΝ	×		e.		•			Υ□	NΣ	6. Underground Injection Control		
Y □ N ☒ 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes", mark all that apply.  a. Batteries b. Pesticides c. Mercury containing equipment d. Lamps e. Other (specify) f. Other (specify)  f. Other (specify)  1. Used Oil Transporter If "Yes", mark all that apply.  2. Used Oil Processor and/or Re-refine If "Yes", mark all that apply.  3. Processor  4 □ N ☒ 1. Used Oil Transporter If "Yes", mark all that apply.  5 □ N ☒ 2. Used Oil Processor and/or Re-refine If "Yes", mark all that apply.  6 □ N ☒ 3. Off-Specification Used Oil Burner					f.	Mixed Wa	ste (hazardous and radioa	ctive)	) Generator					
If "Yes", mark all that apply.    If "Yes", mark all that apply.	В.	Uni	Universal Waste Activities; Complete all parts 1-2.							C. Used Oil Activities; Complete all parts 1-4.				
b. Pesticides c. Mercury containing equipment d. Lamps e. Other (specify)  f. Other (specify)  D. Pesticides  a. Processor  b. Re-refiner  Y N X 3. Off-Specification Used Oil Burner		YE	N ☒ 1. Large Quantity Handler of Universal Waste (you accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal waste managed at your site. If "Yes",				Υ□	N 🗵	If "Yes", mark all that apply.  a. Transporter					
If "Yes", mark all that apply.  Y N X 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity.  If "Yes", mark all that apply.  a. Marketer Who Directs Shipment Off-Specification Used Oil to Off-Specification Used Oil Burner		YE	] N [	×	2.	b. Pesticiono. c. Mercur d. Lamps e. Other ( f. Other ( g. Other ( Destination Note: A h	des y containing equipment specify) specify) specify) on Facility for Universal N	Wast		Y 🗖	N⊠	If "Yes", mark all that apply.  □ a. Processor  □ b. Re-refiner  3. Off-Specification Used Oil Burner  4. Used Oil Fuel Marketer If "Yes", mark all that apply.  □ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off- Specification Used Oil Burner □ b. Marketer Who First Claims the Used		

EPA ID Number				OIVIE	3#: 2050-0024; EX	pires 11/30/2011		
	demic Entities with I uant to 40 CFR Part		ication for opting in	to or withdrawing fr	om managing labor	atory hazardous		
You <u>must check</u> with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K								
<ul> <li>□ 1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply:</li> <li>□ a. College or University</li> <li>□ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university</li> <li>□ c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university</li> <li>□ 2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories</li> </ul>								
11. Description	of Hazardous Waste							
A. Waste Codes your site. Lis								
D001	D002	D003	D035	F003	F005			
			,					
,								
Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.								

EPA ID Number		OMB#: 2050-0024; Expires 11/30/2011							
12. Notification of Hazardous Secondary Mater	ial (HSM) Activity								
secondary material under 40 CFR 26	42 that you will begin managing, are managing 1.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25) um to the Site Identification Form: Notification	)?							
13. Comments									
	*								
Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).									
Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)							
(the	Rob Asselin, Divisional VP	20 JAN 2011							